



DQA:

Date:



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed:

Date:

Work Order update only 

Work Order: \_\_\_\_\_  
 Part No. \_\_\_\_\_  
 NCR No. \_\_\_\_\_

### DISPOSITION

Rework   
 Scrap   
 Use-as-is   
 Suspected Unapproved

### AGAINST DEPARTMENT/PROCESS

Skid-tube   
 Machining   
 Thermoforming   
 Large Fab

Crosstube   
 Small Fab   
 Finishing   
 Composite

Water Jet   
 Prod. Eng. Coor.   
 Rec/Store/Packaging   
 Supplier

Engineering   
 Quality   
 Other

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b>							
	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Pressure/Forced				
	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Set-up				
	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Temperature/Cure				
	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Weld				
	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Wrong Stock Pulled				
	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong					
	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other				
	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread						
	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set						
	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration						
	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence						

**Work Order ID 109450**

November-21-13 2:28:06 PM

**\*109450\***

Page 2

Item ID: D3161-3

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Hinge

Stop

**\*NS2\***

Start Date: 11/21/13 Start Qty: 2.00

**\*2\***

Cust Item ID:

Required Date: 11/21/13 Req'd Qty: 2.00

**\*2\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

**\*130\***

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

13/11/28

100% Complete

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Date:

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Date:

## Work Order update only



Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>			Engineering <input type="checkbox"/>		
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>			Quality <input type="checkbox"/>		
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>			Other <input type="checkbox"/>		
Suspected Unapproved <input type="checkbox"/>		Large Fab <input type="checkbox"/>		Composite <input type="checkbox"/>		Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											
FAULT CATEGORY											
Landing Gear			General								
			Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>			Pressure/Forced <input type="checkbox"/>		
			Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>			Set-up <input type="checkbox"/>		
			Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>			Temperature/Cure <input type="checkbox"/>		
			Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>			Weld <input type="checkbox"/>		
			Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Moved <input type="checkbox"/>			Wrong Stock Pulled <input type="checkbox"/>		
			Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>					
			Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>					
			Inspection Strip in Tube <input type="checkbox"/>	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>						
			Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>						
			Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
			Wave/Twist in Tube <input type="checkbox"/>	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						

# Picklist Print

November-21-13 2:28:05 PM

Page 1 / 1

Work Order ID: 109450

Parent Item: D3161-3

Parent Item Name: Hinge

Start Date: 11/21/13

Required Date: 11/21/13

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP A02.04.26New IssueNG  
IPP Rev:B 08-04-29 update seq. 1 DD verified by:ec

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MS20257-3-7200 PIANO HINGE		Purchased	No			100	f	71.7237	1.44	4		13/11/26	36 9-89

Location	Loc Qty	Loc Code
ST209a	71.7236838	
123960	2.2447368	
m126275	0.509842	
m127172	32.969105	4
m127393	36	

DQA:

Date: \_\_\_\_\_



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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**DART**COPY ISSUE  
DET

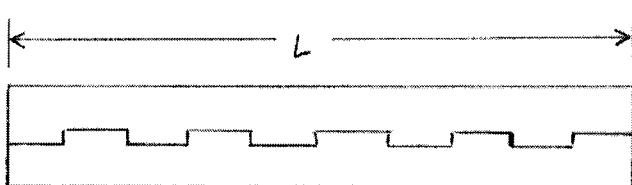
DESIGN	DRAWN BY	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED	APPROVED	DRAWING NO.	REV. A SHEET 1 OF 1
RF	#	D3161	

DATE	02.04.24	TITLE	SCALE
		HINGE	NTS
A	02.04.24	NEW ISSUE	
A1	04.02.27	ADDED D3161-5	
A2	04.06.30	ADD D3161-7 & D3161-9	

RELEASED  
02.04.24

P/N	LENGTH 'L'	DESCRIPTION
D3161-1	13.5"	HINGE (REPLACES MS20257-3-13.5 ON D2183)
D3161-3	15.0"	HINGE (REPLACES MS20257-3-15.0 ON D2950-04)
D3161-5	9.9"	HINGE
D3161-7	14.0"	HINGE
D3161-9	17.0"	HINGE

NOTES:

① MAKE FROM MS20257-3-7200 HINGE

10915  
333  
13-11-25

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